

## Supplemental Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	ACETABULAR IMPLANT AND METHOD FOR THE PRODUCTION OF SAID IMPLANT
Attorney Docket Number::	0512-1319
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BRUNO  
Middle Name::  
Family Name:: BALAY  
Name Suffix::  
City of Residence:: TREVoux  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 70, CHEMIN DES ERABLES, SAINT BERNARD  
Address::  
City of Mailing Address:: TREVoux  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-01600

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-CLAUDE  
Middle Name::  
Family Name:: CARTILLIER  
Name Suffix::  
City of Residence:: LYON  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 56, RUE PAUL SISLEY  
Address::  
City of Mailing Address:: LYON

State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69008

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: CLAUDE  
Middle Name::  
Family Name:: CHARLET  
Name Suffix::  
City of Residence:: SAINT DIDIER AU MONT D'OR  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 77, CHEMIN DES ESSES  
City of Mailing Address:: SAINT DIDIER AU MONT D'OR  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69370

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-CHRISTOPHE  
Middle Name::  
Family Name:: CHATELET  
Name Suffix::  
City of Residence:: ~~CHAZEY SUR AIN~~ Jassans  
State or Province of  
Residence::  
Country of Residence:: FRANCE

Street of Mailing                    ~~ROUTE DE RIGNIEUX~~ Quai Maurice  
Address::                            Utrillo

City of Mailing Address::            ~~CHAZEY SUR AIN~~ Jassans  
State or Province of Mailing Address::  
Country of Mailing Address::        FRANCE  
Postal or Zip Code of Mailing Address:: ~~F-01150~~ 01480

Applicant Authority Type::          Inventor  
Primary Citizenship Country::        FRANCE  
Status::                              Full Capacity  
Given Name::                         MICHEL-HENRI  
Middle Name::  
Family Name::                        FESSY  
Name Suffix::  
City of Residence::                  ~~CHARLY~~ Saint Genis Laval  
State or Province of  
Residence::  
Country of Residence::                FRANCE  
Street of Mailing                    ~~55, RUE DE LA MÔRE~~ 13, rue Luizet  
Address::  
City of Mailing Address::            ~~CHARLY~~ Saint Genis Laval  
State or Province of Mailing Address::  
Country of Mailing Address::        FRANCE  
Postal or Zip Code of Mailing Address:: ~~F-69390~~ 69230

Applicant Authority Type::          Inventor  
Primary Citizenship Country::        GERMANY  
Status::                              Full Capacity  
Given Name::                         LOUIS  
Middle Name::  
Family Name::                        HOVY  
Name Suffix::

City of Residence:: MÜHLTAL-TRAISA  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing LUDWIGSTRASSE 21A  
Address::  
City of Mailing Address:: MÜHLTAL-TRAISA  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 64367

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: ALAIN  
Middle Name::  
Family Name:: MACHENAUD  
Name Suffix::  
City of Residence:: LA BALME DE SILLINGY  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 47, ROUTE DE LA BÂTHIE  
Address::  
City of Mailing Address:: LA BALME DE SILLINGY  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-74330

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-MARC

Middle Name::  
Family Name:: SEMAY  
Name Suffix::  
City of Residence:: SAINT PRIEST EN JAREZ  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 13, RUE DE BEAUMONT  
Address::  
City of Mailing Address:: SAINT PRIEST EN JAREZ  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-42270

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: LOUIS  
Middle Name::  
Family Name:: SETIEY  
Name Suffix::  
City of Residence:: GLEIZE  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 1003, RUE JOSEPH REMUET  
Address:: LA RIPPE  
City of Mailing Address:: GLEIZE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69400

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-PIERRE  
Middle Name::  
Family Name:: VIDALAIN  
Name Suffix::  
City of Residence:: ANNECY LE VIEUX  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing "LA BOISERIE", 8, RUE DU PONT DE THÉ  
Address::  
City of Mailing Address:: ANNECY LE VIEUX  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-74940

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: ULRICH  
Middle Name::  
Family Name:: WITZEL  
Name Suffix::  
City of Residence:: WUPPERTAL  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing IM KÄMPCHEN 7  
Address::  
City of Mailing Address:: GLEIZE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 42279

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: SYLVAIN  
Middle Name::  
Family Name:: ZANELLO  
Name Suffix::  
City of Residence:: MIONS  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 2, ALLÉE MAURICE DRUON  
City of Mailing Address:: ANNECY LE VIEUX  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-69780

**Correspondence Information**

Correspondence Customer Number:: 00466

**Representative Information**

Representative Customer Number::	00466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/002045	7/29/04



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**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0309405	7/30/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::